

**CITY OF ABILENE**

**September 24, 2018**

**ADDENDUM**

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**PROJECT:** SUPPLEMENTAL TRANSPORTATION SERVICES

**RFP DATE:** **SEPTEMBER 26, 2018**

**RFP TIME:** 2:00 P.M.

**RFP NO.:** CB-1867

The following changes, corrections and/or additions should be made in the specification document for the above referenced project. Proposer should acknowledge receipt of this addendum by signing below and returning with their proposal.

Please use the revised Statement of Proposer's Qualifications when submitting proposal.

Also included is a Citylink Ridership Report for information and pre-proposal meeting sign-in sheet.



MELISSA DENSON  
PURCHASING ADMINISTRATOR  
CITY OF ABILENE

PROPOSER'S ACKNOWLEDGMENT

BY \_\_\_\_\_

DATE \_\_\_\_\_

## STATEMENT OF PROPOSER'S QUALIFICATIONS

**Answers to all questions must provide clear, comprehensive data that is not misleading. Attach additional sheets if necessary. A Proposer may submit additional information.**

1. Name of Proposer and permanent main office address:

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2. Date when organized under present name and State of incorporation (if applicable):

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3. Former firm or trade names, with dates of operation for each name:

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4. General character of work performed by your company:

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5. If you have ever failed to complete any work awarded to you, state project location and reason(s), and give name and address of project owner.

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6. If you have ever defaulted on a contract, state project location, amount of contract, reason(s) and give name and address of project owner.

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7. List of similar projects successfully completed. Include amount of contract, type of work, date completed and name and address of owner. \*(satisfies Qualifications/ Experience) Attach additional page if needed.

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8. List of current projects under contract. Include amount of contract, type of work, date completed and name and address of owner. Attach additional page if needed.

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9. Describe your company's Ability to perform the Scope of the contract: \_\_\_\_\_

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10. Give the Quantity and Models of Vehicles to be used for this Contract: \_\_\_\_\_

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Are any of these equipped with wheelchair lifts? Yes/No: \_\_\_\_\_

11. Is your company able to provide Service from 7:30 am to 6:30 pm Monday through Saturday without restrictions? Yes/No: \_\_\_\_\_. If there are restrictions, please state them: \_\_\_\_\_

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12. Is your company able to provide Service from 6:30 pm to 11:59 pm Monday through Saturday without restrictions? Yes/No: \_\_\_\_\_. If there are restrictions, please state them: \_\_\_\_\_

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13. How will your company ensure high quality customer service? \_\_\_\_\_

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14. Does your company have a mobile app that can be utilized to reserve and dispatch this Service? Yes/No: \_\_\_\_\_

15. Upon request, can you provide a detailed financial statement and furnish any other pertinent information required by the City? Yes/No: \_\_\_\_\_

Notary Public \_\_\_\_\_

My Commission expires \_\_\_\_\_, 20\_\_

Proposer's E.I. Number \_\_\_\_\_ (number used on Employer's Quarterly Federal Tax Return)

### AFFIDAVIT OF NON-COLLUSION

I hereby swear (or affirm) under the penalty for perjury:

1. That I am the Proposer (if the Proposer is an individual), a partner in the Proposal (if the Proposer is a partnership), or an officer or employee of the Proposing corporation having authority to sign on its behalf (if the Proposer is a corporation);
2. That the attached Proposal(s) has been arrived at by the Proposer independently and have been submitted without collusion and without any agreement, understanding, or planned common course of action with any other Proposer or materials, supplies, equipment, or service described in the invitation to Proposal, designed to limit independent Proposals or competition;
3. That the contents of the Proposal(s) has not been communicated by the Proposer or its employees or agents to any person not an employee or agent of the Proposer or its surety on any bond furnished with the Proposal(s), and will not be communicated to any such person prior to the official opening of the Proposal(s); and
4. That I have fully informed myself regarding the accuracy of the statements made in the affidavit:

Signed \_\_\_\_\_

Firm Name \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_

### PROPOSAL AMOUNT/ SCHEDULE OF ITEMS AND PRICES

The Contractor shall furnish all labor, tools, equipment, supervision, transportation, insurance, security, accounting, documentation, reports, and all other resources necessary to perform the CityLink Transportation Services complete, in strict compliance with the terms and conditions of this Contract,

CityLink Transit will pay the Contractor rates per trip basis performed. CityLink reserves the right to change or modify the amount of service trips to meet the demands of the service offered by CityLink Transit to the public. Service Trips are defined as the pick-up and drop-off of a CityLink customer as it is stated on the paper manifest. Average length of a service trip is 6.17 miles per customer.

CityLink Transit will determine and schedule the hours of operation for trips to be performed by the Contractor. The Contractor shall be reimbursed on a scheduled per trip basis. Trips begin when a customer boards the vehicle and ends when the customer arrives at the scheduled destination and off loads the vehicle. The Contractor shall be compensated ½ price of a schedule trip for no shows and/or cancellation of trip at the door.

Company Name: \_\_\_\_\_

Proposed Cost of Each Trip:

Year 1 - Effective Date of Contract through September 30, 2019	\$ _____
Year 2 – October 1, 2019 through September 30, 2020	\$ _____
Year 3 – October 1, 2020 through September 30, 2021	\$ _____
Year 4 – October 1, 2021 through September 30, 2022	\$ _____

Each proposed vehicle must be inspected by CityLink/City of Abilene for interior and exterior cleanliness, mechanical reliability, damage, overall appearance prior to award of contract.

\_\_\_\_\_  
Signature of Company Official

\_\_\_\_\_  
Date



# Productivity by Funding Source - TX\_Abilene

For Time Period: 9/1/2017 - 8/31/2018

Printed: 9/19/2018 15:08:28

Service Miles	Non-Rev Miles	No Show Miles	Revenue Hours	Passenger Hours	Cancels	Attnd Count	AMB	Vehicle Miles	Passengers
Revenue Miles	Passenger Miles	Service Hours	Non-Rev Hours	No Show Hours	No Shows	Guest Count	Wheelchair	Vehicle Hours	One Way Trips
ADA									
379,255	24,894	43	26,500.56	24,006.33	6,228	2,802	39,340	388,427	62,240
354,361	1,682,783	29,816.08	3,315.52	13.42	1,217	1,044	19,054	30,424.73	58,394
CDBG									
78,732	7,686	99,461	4,708.14	2,473.63	1,707	295	7,579	92,747	8,125
71,046	56,097	5,350.12	641.98	50.43	577	2	249	6,514.02	7,828
General Public									
8,766	854	0	667.93	377.58	422	64	416	66,584	1,293
7,912	6,489	761.74	93.81	2.90	32	34	779	4,779.62	1,195
Unidentifiable									
12	12	0	0.00	0.00	0	0	0	0	0
0	0	0.83	0.83	0.00	0	0	0	0.00	0
Grand Totals									
466,765	33,446	99,504	31,876.63	26,857.55	8,357	3,161	47,335	547,758	71,658
433,319	1,745,369	35,928.77	4,052.14	66.75	1,826	1,080	20,082	41,718.37	67,417

## CITY OF ABILENE

**September 19, 2018**

## PRE-PROPOSAL MEETING

**PROJECT:** SUPPLEMENTAL TRANSPORTATION SERVICES - RFP #CB-1867

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